

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th St., 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BD

2008 JAN 18 PH 4:26

COMMITTEE NAME (Must be same as on Statement of Organization)

Marzon for County Attorney

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Jesse M. Marzon

Political Party (If applicable)

—

Office Sought

County Attorney, Floyd

District (If Senate or House)

—

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE

REPORT

For Office Use Only

Comm. # _____

Logged in _____

Scanned _____

Computer _____

Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

SIGNATURE OF PERSON FILING REPORT

641-228-2274

TELEPHONE

1-9-08

DATE SIGNED

I AM FILING A January 19th, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held
Floyd

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

0.65

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

0.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

0.65

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below)

0.00

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (If final report balance must be zero)

0.65

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

0.00

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

1,000.00

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Marzen for County Attorney

Keep Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-01-07	Marzen, Kim PO Box 696 Charles City, IA 50616	Mother	Forgive Loan	\$ 1,000.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 1,000.00	
TOTAL (If last page of this schedule)				\$ 1,000.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an In kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)
Matzen for County Attorney

TOTAL UNPAID LOANS FROM <u>LAST</u> REPORTING PERIOD \$	1,000.00
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(Original source of loan, such as a bank, must be shown if a third party is involved. Includes loans from candidate's personal funds.)

TOTAL (PART 1) \$ _____

(Loans forgiven must be reported on Schedule E -- Third Contributions;

TOTAL CASH REPAYMENTS (PART II) \$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0.00

Page 1 of 1
(For Schedule F)